MISSOURI DEPARTMENT OF REVENUE EMPLOYER'S WITHHOLDING TAX UNDERPAYMENT AMENDED RETURN MO-94 (REV. 11-		FORM MO-941U (REV. 11-2000)	2. Compensation	Ф	0 0
		(1127.112000)	Deduction	♥	
MO TAX ID NUMBER	FOR TAX PERIOD (CC,YY,MM)		Previous Overpayment Credits		0 0
FEIN	FILING FREQUENCY		4. Additional Balance Due	\$	0 0
BUSINESS NAME			5. Additions to Tax (see Instructions)	\$	0 0
OWNER'S NAME			6. Interest (see Instructions)	\$	0 0
MAILING ADDRESS (STREET, CITY, STATE, ZIP CODE)			7. Total Additional Amour Due (U.S. funds only)		0 0
I have direct control, supervision or responsibility for filing th		the tax due. Under			
penalties of perjury, I declare it is a true, accurate and complete return.				*	
AUTHORIZED SIGNATURE	DATE		DOR USE ONLY		
				*	
MAIL REMITTANCE AND RETURN TO: Missouri Department of Revenue, P.O. Box 999, Jefferson					
City, Missouri 65108-0999.					